"Personal Information" consists of the following: name, address, Social Security number, driver's license number, medical or disability information, photographs, computer images and telephone number. All other information may be provided.

Place an "X" in front of the category that describes your reason for obtaining the records being requested. If applicable, after your selection provide the additionally requested information. You may mark only one category per request form. Only those persons who are listed below may receive personal information."

may receive personal information."
I AM:
A law enforcement official with an official need for these records. Badge #:
A court official with an official business need for these records. Court Official #:
A representative of a local, state, or federal agency, or an elected local state, or federal official with an official need for these records. <b>Jurisdiction and Title:</b>
The legal representative of the person(s) named in the records. <b>Attorney number:</b>
An attorney not representing the person(s). These records are necessary for legal business involving the person(s).  Attorney number:
An individual or representative of an organization which needs these record(s) in connection with a civil, criminal, administrative, or arbitration proceeding before a court, a government agency, or a self-regulatory body.  Organization:
A representative of the insurance industry or a self-insured entity. These records are necessary for claims investigation, anti-fraud activities, insurance rating, or underwriting. <b>Organization:</b>
A representative of a private toll transportation service with a legitimate business need for these records.  Toll transportation service:
A representative of a licensed private investigator or security service which needs these records for an legitimate business purpose. <b>Professional license #</b> :
An individual or representative of an organization which need these records in the normal course of business. Personal information will be provided only to verity personal information provided by the requester. If the information provided by the requestor is incorrect, the BMV will provide the correct information only if its disclosure is necessary to prevent the person(s) from committing fraud, for the pursuit of legal action, or in connection with the collection of a debt or security interest. <b>Organization:</b>
An individual or representative of an organization which will use these records to provide notice to owners of towed or impounded vehicles. <b>Organization:</b>
An individual or representative of an organization which will use these records in regard to motor vehicle or driver safety and theft, motor vehicle emissions, product alterations, recalls or advisories, performance monitoring of motor vehicles, motor vehicle parts, or dealers, or the removal of non-owner records from the original owner records of motor vehicle manufacturers. <b>Organization:</b>

Signature of BMV CSR		Branch	Date (month, day, year)	
Driver license number	State of issuance	Expiration date	Date of birth (month, day, year)	
Printed name	Signature		Date (month, day, year)	
"The Bureau may disclose personal informatidentity" IC 9-14-3.5-10		on requesting the inforr	mation provides proof of	
"A person requesting the disclosure of personal information from Bureau Records who knowingly or intentionally misrepresents the person's identity or makes a false statement to the Bureau on an application required to be submitted under this chapter commits a Class C misdemeanor." IC 9-14-3.5-15				
By law, personal information may NOT be resold or re-disclosed for the purpose of distributing surveys, marketing or solicitation.				
** For vehicle records purposes, only the personal information of the most recent owner of the vehicle will be provided.				
None of the above. Personal information regarding the person(s) will not be provided.  * For vehicle records purposes, no personal information of any prior owners of the vehicle will be provided.				
	. ,	will not be provided		
** A person required by law to give notice to a previous owner of a motor vehicle (including a person an applicant for a mechanic's lien title or Affidavit of Ownership title).				
commercial driver's licenses. <b>Organization:</b>				
* The employer of the person(s) or its repres	sentative. These records are	e necessary to comply wi	th federal laws regarding	
permission is attached. This document includes the name of the requester, a statement of permission for the Indiana Bureau of Motor Vehicles to release the personal information, the printed name and notarized signature of the individual whose personal information is being obtained, and the date the permission was granted.				
the person(s) or his or her parent or lega	al guardian if the person is	a minor. A copy of the	document granting this	
An individual or representative of an organization which has written permission to receive this/these document(s) from				
* The parent or legal guardian of the minor person(s) named in these records.				
* The person named in these records.				
reports. The personal information provided  Organization:				
An individual or representative of an orga	anization which will use the	ese records for research	activities and statistical	

## REQUEST FOR BUREAU RECORDS The Indiana Bureau of Motor Vehicles' records are open to the public. All requests for records must be in writing. Please complete the following application for drivers license record. You must complete a separate application for each license record you are requesting. NOTE: The Bureau cannot disclose a person's Social Security number, Federal Identification number, or Driver's License number. INSTRUCTIONS: Make cashier's check, money order or personal check payable to: Bureau of Motor Vehicles Driver Records / IGCN 100 N. Senate Ave., Room N405 Indianapolis, IN 46204 Telephone: (317) 232-2894 TOTAL DUE: \$ \_\_ Name of person or business making request (first name, middle initial, last name) Mailing address of person or business making request (number and street or rural route) State ZIP code City Please complete form below for driver information requested. Name of driver (first name, middle name, last name) Driver's license number Date of birth (month, day, year) Place a check mark next to the driver information you are requesting. Driver's License Record (ODR / MVR) **Certification of Record** Fee: \$4.00 + (plus) Fee: \$4.00 Record Fee: \$ Name of adverse driver Date of loss (month, day, year) SR 21 - Proof of Insurance at time of Accident Location of accident Name of insured driver Fee: \$4.00 **Driver's License History** Fee: \$8.00 A driver's license history is a driver record plus photo copies of underlying documents: Please specify documents being requested: **Driver's License** A driver's license record includes: **Driver's History** A driver's history includes all information listed Record (ODR / MVR) 1. Driver's name and address Fee: \$8.00 under Driver's License records and phot copies Fee: \$4.00 2. Physical description of SPECIFIED documents. Processing time is 3. Type of license issued, status and any approximately 2 - 8 weeks. restrictions 4. Issue and expiration date Certification A certified record is admissible in a court of law. 5. List of tickets / violations etc. of Records The record is certified as being a copy of the Processing time is 7 - 10 working days Fee: \$4.00 plus original documents. Record Fee Proof of insurance at the time of an acci-SR 21's

the date of the accident, before the information is available to the customer.

dent. It takes approximately 120 days, from

**Proof of Insurance** 

Fee: \$4.00